# CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS

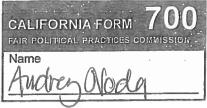
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Please type or print in ink.		APR - 1 2011		
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. Office, Agency, or Court	- O	Human Resource Division		
Agency Name  CASTATE CONTROLLERS OFFICE Deports Churtor SAMT  Division, Board, Department, District, if applicable  Your Position				
► If filing for multiple positions, list below or on an attachme				
Agency: CALSTRS, CALPORS	Position: Attemate	Para Mambu		
Jurisdiction of Office (Check at least one box)  State  Multi-County  City of	•			
. Type of Statement (Check at least one box)				
Annual: The period covered is January 1, 2010, through 2010.	(Check one)			
The period covered is/, through 2010.	h December 31, O The period covered is leaving office.	s January 1, 2010, through the date of		
Assuming Office: Date/	<ul> <li>The period covered is of leaving office.</li> </ul>	s/, through the date		
Candidate: Election Year Office	ce sought, if different than Part 1:			
Check applicable schedules or "None."	► Total number of pages including	8		
Schedule A-1 - Investments - schedule attached  Schedule A-2 - Investments - schedule attached  Schedule B - Real Property - schedule attached	Schedule D - Income - Gifts -	& Business Positions – schedule attached schedule attached  Travel Payments – schedule attached		
None - No reportable interests on any schedule				
. Verification				
		DDE		
herein and in any attached schedules is true and complete. I acknowledge this is a public document.				
I certify under penalty of perjury under the laws of the State of California				
Date Signed 3/20/ II (month, day, year)	Signa			

## SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)



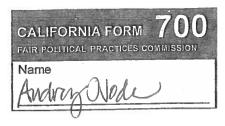
	➤ 1. BUSINESS ENTITY OR TRUST
- 1. BUSINESS ENTITY OF TRUST  A WARDWAND VOTE GIVEN-	I. BUSINESS ENTITY OR TRUST
Name 555 S. Flower St., Soute 4210 las/hylls	Name
Address (Business Address Acceptable)  Charleses	Address (Business Address Acceptable)
Check one  Trust, go to 2  Business Entity, complete the box, then go to 2	Check one  Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY SUITE CARD MARWY DRAWIZAVY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE   F APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / / 10   / 10     100,001 - \$1,000,000   ACQUIRED   DISPOSED   Over \$1,000,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / _/10   //1
NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION NOVE SOME POWN NOWS	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION TOUNE OF THE POWER BUSINESS POSITION TOUNE AND THE POWER BUSINESS POSITION TO THE POWER BUSINESS POWER B	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
\$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	➤ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000   / /10
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2

# SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Andrey Oloda

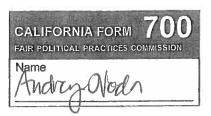
1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME WHO'S COMMENTS - NO PECAN FRUNDS OF SCOTT SOUNCE PS - NO PECAN FRUNDS OF ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE PS Anyth; CA CAMPAICH COMMINITY YOUR BUSINESS POSITION  NONC - SPOWEL'S BUSINESS PAW AND	NAME OF SOURCE OF INCOME  DIVOTA COMMUNICATION  ADDRESS (Business Address Acceptable)  2995 Overland Afre, State 210  BUSINESS ACTIVITY, IF ANY, OF SOURCE  US AULUSI CA 90064  YOUR BUSINESS POSITION  ONLY POWAL POWALS PAWAMA  GROSS INCOME RECEIVED  \$1,001 - \$10,000  \$1,001 - \$10,000  OVER \$100,000  CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income  Loan repayment Partnership  Sale of (Property, car, boat, etc.)  Commission or Rental Income, list each source of \$10,000 or more  (Describe)
not in a lender's regular course of business must be	your official status. Personal loans and loans received disclosed as follows:
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF LENDER	SECURITY FOR LOAN None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	
\$1,001 - \$10,000	City
\$10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

# SCHEDULE D Income – Gifts



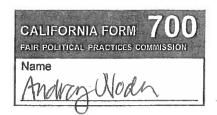
The state of the s	
NAME OF SOURCE	NAME OF SOURCE
LA Co. Federation or fabor	ADDRESS (Business Address Acceptable)
ADDRESS (Business Address Acceptable) 2120 JUMNYM. WOODD BIVA, LA CA 90006	ADDRESS (Business Address Acceptable)
2/30 James M. WOODO DIVA, LA CA WOUL	P.O. Box 86812 UA-Ca 90086
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
MOON	DATE (mm/dd/w) VALUE DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	24 4
1,15,10 3000 MLK forced chart	2,19,10 ,11000 Installation Dinne
·/ \$	
\$	
Neighborwood Hastancer of Ovange Co.	Vally Industry & Commerce Asson.
ADDRESS (Business Address Acteptable)	ADDRESS (Business Address Acceptable) 5121 Van Numo Bwd. #103. Sherman Dale
Non proper Jowanny	BUSINESS ACTIVITY, IEANY, OF SOURCE CA. 91403
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
2,25,10 :100°0 Awards Dynner	4,200,10 4500 State Office Holders
NAME OF SOURCE  WINDAN W SUS ARSON. OF CW  ADDRESS, (Business Address Acceptable)  955 Wennyl Graf #150 San Diwaya	NAME OF SOURCE Paul Anum
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) 556- Stair Oak Are Smiti 101 A 4468
955 Westand Gowl 450 San Diwaga	DOG. 8 PAIN ONES PINE SWILL IN WO
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE WANDOWN, COMMON
We to Y	DATE (mm/ddan) VALUE DESCRIPTION OF GIFT(S)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (IIIIIIIIII)
4, 16, 10 37.67 Receptor	4,17,10, 2500 (n. Dempanty
	anner tickel
	\$
	\$
,	y
Comments:	

### SCHEDULE D Income - Gifts



NAME OF SOURCE  PAR POVOWN (MBHALL)  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  POLLA (MBHALL)  DATE (mmdddyy) VALUE DESCRIPTION OF GIFT(S)  T 29, 10 12500 Awards Dinner	NAME OF SOURCE  LENDANBURY TRUCKS ACCEPTABLE)  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  NON PROPH-  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  7,22,10   5000 AWAYDO DATE
NAME OF SOURCE CA SOCIOTO OF WHINGOOD FINANCE	NAME OF SOURCE
ADDRESS (Business Address Acceptable) AUTHORY  ALAO W. ORADWAY HAW WOME & 90250  BUSINESS ACTIVITY, IF ANY, OF SOURCE  (WORLDOWN RESOURCE)  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  8 19 10 3550 WMCMANAGAM	ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  ADDRESS ACTIVITY, IF ANY, OF SOURCE  DATE (mm/dd/yy) VALUE  DESCRIPTION OF GIFT(S)  DXX, C \$12500 (WAYA: 727W)
	\$
ADDRESS (Business Address Acceptable) LAGG CALL RUM, SUNTO C GOLLA, A BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVI	ADDRESS (Business Address Acceptable)  BUSINESS ACTIVITY, IF ANY, OF SOURCE  NON DYDPH  DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  10, 1, 10, 12500 Peceptur
	\$\$ \$
Comments:	

#### SCHEDULE D Income - Gifts



NAME OF SOURCE	NAME OF SOURCE
ABRAN PSUBINESS RESSOCIATION, WSAMUL	10 Kovean Health Gouceten Informatur
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) KLSeavo (Mt2)
120 S San Pears St, Suay 529	1 3121 W. Ceth St. Smite 201 LA 100
BUSINESS ACTIVITY, IF ANY, OF SOURCE WE AWAIL ES (A	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Parsiness organization 90012	NonDropy
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
10,7,10 24500 Awards hund	10,21,10 \$ 1800 Awards Dinner
\$	\$
▶ NAME OF SOURCE	NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DOSINEES NOTIVITY, II MIN, OF SOSINGE	- BOOKESO ACTIVITY, IF ART, OF SOCKES
DATE (mm/dd/yy) VALUE . DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
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► NAME OF SOURCE	▶ NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
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BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
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Comments:	